IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Art Unit: 3745

In re Application of: Herbert MULLER

Application No.: 10/661,546								Examiner: M. S. Leslie							
Filed: September 15, 2003								Washington, D.C.							
For: ADJUSTABLE-LENGTH ACTUATING ELEMENT								Atty.'s Docket: MULLER=10							
									Confirmation No.: 9053						
Customer Service Window, Mail Stop Amendment Horozable Commissioner for Patients U.S. Patient and Trademark Offlice Randolph Building, 401 Dularn Street Alexandria, Winjina 22314							1	Date: S	eptembe	4, 2008					
Sir:															
Transi	mitted herewith is an_A	MENDMENT	AND REMARKS I	the above-iden	ntified applica	ition.									
	Small Entity Status A		claim small entity sta	atus. See 37 C.	F.R. §1.27.										
[XX]	No additional fee is re														
[]	The fee has been cald	ulated as sh	nown below:												
	(Col. 1)		(Col. 2) (Col. 3)			SMALL ENTITY					OTHER THAN SMALL ENTITY				
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA EQUALS		RATE			TIONAL	OR		RATE	ADDITI FE		
TOTA		MINUS	** 20	0	×	25	\neg	\$		1	×	50	\$		
INDE	. *	MINUS	*** 3	0	×	100		\$			х	200	\$		
FIRST	PRESENTATION OF	MULTIPLE	DEP. CLAIM		+	180		\$			+	360	\$		
[XX]	If the 'Highest Number Previously Paid for in 'THIS SPACE is less than 2, while 2 or it may appear. If the 'Highest Number Previously Paid For' (total or independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment of the number of claims originally filed. Conditional Petition for Extension of Time If any extension of time for a response is required, applicant requests that this be considered a petition therefor.														
	Small Entity						Other Than Small Entity								
	Response Filed Within				F	Response Filed Within									
	[] Second - [] Third -	\$ 510.00 \$ 795.00 iod Set	tdy paid for mo	nth(s) extension	,	i 1	First Second Third Fourth ter Time	1 - S - S	1020.00						
[]	Please charge my De	posit Accour	nt No. 02-4035 in the	amount of \$											
[]	Credit Card Payment Form, PTO-2038, is attached, authorizing payment in the amount of §														
[]	A check in the amoun	t of \$	is attach	ed (check no.).											
[XX]	The Commissioner is to Deposit Account No fee, not covered by ch processing fees under	o. 02-4035. eck or speci	This authorization a ific authorization, bu	nd request is no t is also intende	ot limited to p and to include a	ayment c	of all fee or the p	s assoc	iated wit ion of ex oes <u>not</u> in BRC	n this comi ra claims i iclude pate	munica under 3 ent issu D NEIM	tion, includir 7 CFR §1.1 e fees unde IARK, P.L.L.	ig any Exter 6 and all pa r 37 CFR §	sion of Time ent	
Facsimile: (202) 737-3528 Telephone: (202) 628-5197									By:	By: /Ronni S. Jillions/ Ronni S. Jillions Registration No. 31,979					